

Cheryl Christiansen
City Clerk
Lucille Taylor
Deputy City Clerk



Office of the City Clerk

Phone (518) 279-7134
Fax (518) 270-4639

DOG LICENSE APPLICATION

License #	
Date Issued	Expiration Date

OWNER IDENTIFICATION (Person who harbors or keeps dog):

If owner is less than 18 years of age, parent or guardian shall be deemed the owner of record and the information must be completed by them.

Last Name

First

Mailing Address:

Street

City of Troy, NY

Zip

Do you own this property or are you a tenant?

If tenant, give the name and phone # of your landlord:

Phone #:

Year of Dog's Birth:

Dog Breed:

Male:

Female:

Spayed/Neutered: Y/N

Dog's Name:

Dog's Color/Markings:

* Exemption: Guide, war, police, work, hearing, service dogs must have documentation

Type of license FEE

Spayed/Neutered \$15.00

Unspayed/Unneutered \$20.00

Senior Citizen (w/proof of Age 65 or older) \$ 7.50

Owner's Signature:

NYS Driver's License or Non-Drivers License:

Copy of Rabies Certificate Attached